

Welfare Foods Service

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THE WELFARE FOODS SERVICE

FIFTY years ago it was not unusual for several members of a family to die in infancy. Of every 1,000 babies born at that time, as many as 154 died within twelve months. Today the story is very different. Not only do more babies survive during the critical first twelve months—last year only 32 out of every 1,000 babies died before they reached the age of one—but the general standard of health of our children is much higher than it was at the turn of the century.

Children are taller and heavier than they were. Referring to a recent survey of the heights and weights of London schoolchildren, the *Lancet* (July 1st, 1950) says :

“The report indicates that for both boys and girls, and at every age, there have been increases in both height and weight over the past ten years. The average increase, for both boys and girls, in height is about 1.3 per cent., and in weight 2.2 per cent. of the 1938 level. . . . A striking feature of the changes in the averages over the past ten years is the fact that the change in weight has been proportionate to the change in height so as to leave the ratio of weight to height in each age group almost unchanged. The fact that bone and flesh have kept pace with each other . . . suggests that with improved nutrition in schoolchildren, nature has maintained her own balance ; that children of today are not merely heavier or merely taller than were their parents, but are of altogether greater physique. It is as though by pre-war scales of growth the post-war children were three months older than indicated by their year of birth.”

While this improvement of physique has been taking place there has also been a decline in the incidence of conditions caused by inadequate or incorrect diet. Fewer children suffer from decayed teeth. Rickets and other diseases which are the result of malnutrition are rare today. It is remark-

able, too, that the war did not have the adverse effect which it might have had upon children born and reared during that difficult time. On the contrary, the gradual improvement which had been taking place since the beginning of the century was not only maintained during the war and the years of shortage which followed, but the rate of improvement was speeded up.

How has this progress been achieved? Improved social services, increased attention to the welfare of expectant mothers and children, the provision of special help in the home, wider knowledge of the principles of nutrition and the application of this knowledge to the task of safeguarding the nation's health have all played their part.

Another factor which has contributed towards the improvement made during and after the war is the Ministry's rationing policy. “Fair shares for all” has been the basis of our rationing system, but an essential part of “fair shares” has been “the little bit extra” for those in special need. It is the recognition of the special nutritional needs of the “vulnerable groups” of the population—expectant and nursing mothers and young children—which is the basis of the Welfare Foods Service. Before the war, only those expectant mothers and infants who were clearly suffering from malnutrition were given milk and vitamin products at a low price or free of charge. Today, under the Welfare Foods Service, milk and vitamin supplements are available for all expectant mothers and young children at a subsidised price, or free if necessary.

National Milk Scheme

The corner stone of what was later to become the Welfare Foods Service was laid in July, 1940, when the National Milk Scheme was introduced. Milk is particularly necessary for expectant mothers and young children because it contains most of the nutri-



ents essential for growth. One of these is calcium, which helps to build the baby's bones and teeth and to keep the mother in good condition. Another is protein, which builds and repairs the tissues. The National Milk Scheme provided a pint of milk a day at 2d. a pint, or free if necessary, for every expectant mother and every child under five in the country.

Although breast-feeding is the natural and best way of feeding babies, it is not always possible; nor is liquid milk always a suitable alternative. Accordingly, arrangements were made to manufacture a special full cream dried milk powder known as National Dried Milk or "N.D.M.". This food was first made available in August, 1940, as an alternative to liquid milk for children under two years old. It was supplied under the National Milk Scheme at 1s. 2d. per 20 ounce tin, or free if parents could not afford to pay for it.

Some babies under two or three months old, particularly those born prematurely, cannot even digest full cream dried milk. For such babies an alternative food was provided in the form of half cream National Dried Milk. This food was introduced in June, 1941, and was supplied under the National Milk Scheme at the same price as full cream "N.D.M.".

Vitamin Supplements

Although milk is essential for expectant and nursing mothers and for growing babies, it does not contain sufficient quantities of vitamins A, C and D to satisfy their needs. Vitamin A helps to promote growth, to build up resistance against disease and to protect the eyes. It is obtained from fats and the fatty parts of animal foods, such as liver, dairy produce and eggs, and from green vegetables and carrots. Vitamin C helps to establish general well-being and keeps the complexion healthy. The principal sources of this vitamin are fresh fruit and vegetables. Vitamin D is especially important for expectant mothers and young babies for the formation of strong and healthy

bones and teeth. Like vitamin A, it comes from fats and the fatty parts of foods, chiefly animal products. It is also obtained by the action of sunlight.

In December, 1941, on the recommendation of the Standing Inter-departmental Committee on Medical and Nutritional Problems of the Chief Medical Officer of the Ministry of Health, vitamin supplements were first made available for young children. Distribution was linked with the National Milk Scheme, which became known as the National Milk and Vitamins Scheme. To begin with, black-currant products, which are an important source of vitamin C, and cod liver oil, which is rich in vitamins A and D, were made available free of charge for children under 2 years old. From April, 1942, the black-currant products were gradually replaced by concentrated orange juice, made from the juice of fresh oranges and imported from the United States under Lend-Lease. A small charge was then made for the vitamin supplements, but if parents could not afford it, the supplements were issued free of charge.

In September, 1942, the National Milk and Vitamins Scheme was re-named the Welfare (Foods) Scheme and, in December of that year, its scope was widened to provide every expectant mother, and child under five, with cheap, or free, orange juice and cod liver oil as well as the daily pint of milk to which they had been entitled since July, 1940. From April, 1943, vitamin A and D tablets were provided for expectant mothers as an alternative to cod liver oil.

Developments Since 1946

It is sometimes assumed that the need for welfare foods decreases as supplies of ordinary foods become more plentiful and varied. This is not so. Adequate supplies of milk and vitamin supplements are always necessary for expectant and nursing mothers and young children. Before the war, the Health Ministries recommended that all breast-fed infants should receive supplements of fresh fruit or vegetable juice—or both—to provide vitamin C, and

a small daily dose of cod liver oil to provide vitamins A and D. They also recommended that when breast-feeding was not possible, the basis of the infant's diet should be milk supplemented by substances rich in vitamins A, C and D.

It was with these facts in mind that, in 1946, the Government decided to put the Welfare (Foods) Scheme on a permanent footing. In July of that year the Scheme was associated with the Family Allowances Scheme and became known as the Welfare Foods Service. Since then it has been an established feature of the social services provided by the State.

When the permanent Welfare Foods Service was set up in 1946, the prices of some of the foods were altered. Milk was supplied at 1½d. a pint instead of 2d. (compared with the normal retail price of 5d. a pint); cod liver oil and vitamin A and D tablets were supplied free of charge instead of at 10d. a bottle or packet; and National Dried Milk cost 10½d. a tin instead of 1s. 2d. The price of orange juice remained at 5d. a bottle. These prices remain in force today, but all Welfare Foods continue to be supplied free of charge to those who cannot afford to pay for them.

The scope of the Service has been further expanded since 1946. In July, 1947, arrangements were made for non-residential nurseries to receive free milk (or National Dried Milk), free cod liver oil, and orange juice at 5d. a bottle. The allowances of these foods which the children receive under these arrangements are additional to the quantities to which they are entitled at home. Since August, 1947, children between 5 and 16 years of age who are disabled mentally or physically and are consequently unable to attend school, have been entitled to a pint of milk a day at the cheap rate of 1½d. a pint. This arrangement puts them on a similar footing with other children who receive a daily allowance of free milk at school under the Milk-in-Schools Scheme. The arrangement does not apply to handicapped children in institutions. Also, since August, 1947, mothers have been

provided with vitamin A and D tablets free of charge for thirty weeks after confinement.

The present scales of allowances for each of the foods provided under the Welfare Foods Service are set out in Table I on page 6 and the prices in Table II on page 7.

How the Service Works Today

Ration Books for Expectant Mothers.

As soon as an expectant mother receives a certificate of pregnancy from her doctor, or from a certified midwife or health visitor, she should take it—or send it—to her local Food Office. She is then given a supplementary grey ration book (R.B.7) which enables her to obtain the milk, orange juice and cod liver oil or vitamin A and D tablets to which she is entitled under the Welfare Foods Service. (The grey ration book also entitles her to obtain one half-ration of meat a week and one egg at each allocation in addition to the ordinary rations which she continues to draw on her ordinary ration book.)

The grey ration book has to be renewed, if necessary, four months after the date when it was first issued. All the expectant mother has to do is to take or send a further certificate of pregnancy to the Food Office, together with her grey ration book. The grey ration book will be returned after it has been endorsed.

Ration Books for Children under Five.

After the baby is born, the birth has to be registered as soon as possible with the Registrar of Births and Deaths. The Registrar supplies a birth form which should be taken or sent to the Food Office together with the mother's supplementary ration book (R.B.7) and her own ration book (R.B.1). The Food Office will then supply a green ration book (R.B.2), and an identity card for the baby, and a page of coupons which will enable the mother to obtain the vitamin A and D tablets to which she is entitled for 30 weeks after the baby is born. A special book of coupons is

issued if the baby is fed on National Dried Milk. The green ration book enables the baby to have his supplies of milk, orange juice and cod liver oil under the Welfare Foods Service. (It also provides—initially for the mother's benefit—adult rations or allowances of bacon, cheese, eggs, fats, sugar and sweets and half the adult ration of meat, but no tea.)

Registration for Milk. Although ordinary consumers no longer have to register with their milkman, expectant mothers and young children under five years old must be registered if they wish to obtain cheap or free milk under the Welfare Foods Service. The retailer then claims from the Ministry the balance of the payment due to him for the milk supplied in this way.

Welfare Foods Distribution Centres. Orange juice, cod liver oil and National Dried Milk are obtained at Welfare Foods Distribution Centres. About 10 per cent. of these centres are in food offices. The rest are in clinics, child welfare centres and other centres with voluntary helpers. Village shops, church halls, even private houses, have all served as centres. Some outlying areas and new housing estates with no Welfare Foods Centre within easy reach are served by vans.

Before she can obtain orange juice, the mother has to affix stamps to the value of 5d. to the appropriate coupons in her child's ration book or in her own supplementary ration book. For National Dried Milk, stamps to the value of 10½d. are needed. By special arrangement with the Postmaster General, the stamps can be obtained at Food Offices, Sub-Food Offices and some of the other distribution centres as well as from Post Offices. No stamps are needed for the cod liver oil or the vitamin tablets since they are supplied free of charge. The appropriate coupons are cut out of the ration book at the welfare foods distribution centre each time a fresh supply of welfare foods is handed over. Mothers are asked to return all empty orange juice and cod liver oil bottles.

Free Supplies.—Applications for free supplies of milk, National Dried Milk and orange juice are made to the local Food Office. They are granted automatically if the family is already receiving assistance from the National Assistance Board. The circumstances of other families who apply for free supplies are investigated locally by the National Assistance Board who advise whether free benefit is needed.

Sources of Supply

With the exception of orange juice, all the welfare foods are produced or manufactured in this country to the Ministry's specifications (see Table III on page 8).

The fresh cod liver oil landed from the trawlers is purified under vacuum and then filtered at freezing point to give an oil which is clear and bright at winter temperatures. The oil is then tested biologically for its content of vitamin A and D, and, when necessary, the amount of A and D is adjusted to the standard required by the Ministry of Food. All the oil is produced by the British fishing industry and processed and packed by a firm in the north of England on behalf of the Ministry of Food.

During the war, orange juice for the Welfare Foods Service was provided by the United States under Lend-Lease. Since then, because of the shortage of dollars, the Ministry has tried to find alternative sources in soft currency areas. As a result, supplies are now being imported from the British West Indies, South Africa, Israel, Spain and Brazil. The Ministry has a ten-year contract with the British West Indies which, it is hoped, will encourage production and provide increasing supplies for the Welfare Foods Service. Until now, thanks to Marshall Aid, the balance of the supplies needed to maintain the Service has continued to come from the United States. Future imports from there will depend upon the quantities available elsewhere and the arrangements that can be made for payment in dollars.

Demand for Welfare Foods

The value of liquid milk has come to be more and more appreciated in recent years, particularly as an essential part of the diet of expectant mothers and young children. Before the war many families could not afford enough milk. The Welfare Foods Service has brought milk within the reach of all families with young children and it is readily taken up although the importance of ensuring that it is drunk by those for whom it is intended may not always be appreciated.

Mothers have not been so ready to take advantage of the other benefits provided by the Service. This may be partly because some of them prefer to buy vitamin products from the chemist but it may also be due to a lack of understanding of the importance of vitamins to the child's growth and development. There may be, too, a suspicion of what some people still regard as a new-fangled idea. But vitamins are not just a fad. They are an essential part of everyone's diet. Expectant and nursing mothers and young children have special need of them and for this reason it is important to ensure that their full entitlements of welfare foods are taken all the year round. Some mothers are inclined to look upon orange juice and cod liver oil as medicines which need only be taken when their children are ill. They do not realise that these foods are preventives rather than cures and that their purpose is to build up the child's resistance to illness and infection. Mothers are therefore urged

to see that their children take their welfare foods regularly in summer as well as in winter.

Tributes to the Service

The nutritional importance of Welfare Foods has been stressed by posters, leaflets, talks, films and displays at exhibitions. But the Service's best support has been the tremendous enthusiasm of the staffs of Local and Regional Food Offices and their bands of voluntary helpers, in particular, members of various women's organisations such as the Women's Institutes and the W.V.S. The expert help and great influence of the district nurses and the staffs of maternity and child welfare centres have also played a most valuable part in the distribution of welfare foods.

Tributes to the Service have come from many and varied quarters; from the "hard-up" mother who sends the Ministry a snapshot of her small daughter and says "thank you" for the benefits she has enjoyed, to a member of the French Academy of Medicine who attributes the "excellent physical condition" of our children to their "perfectly balanced diet and the system of milk in schools, school feeding centres and extra vitamin nourishment". How much more encouraging is that statement than the estimate made by Sir John Boyd Orr (now Lord Boyd Orr) in 1935, which indicated that between a fifth and a quarter of our children were living on a diet inadequate in all respects.

TABLE I : ALLOWANCES OF WELFARE FOODS

(The allowances for children in non-residential nurseries are additional to those to which they are entitled at home)

MILK

Expectant Mothers	}	1 pint per day
Children under 5 years (at home) ⁽¹⁾		
Handicapped children aged between 5 and 16 years ⁽²⁾		
Children under 5 years (in non-residential nurseries)		Two-thirds pint per day

⁽¹⁾ Excluding children under 2 years fed on National Dried Milk.

⁽²⁾ Children (except those in institutions) who are unable to attend school because of physical or mental disabilities.

NATIONAL DRIED MILK (FULL OR HALF CREAM) (20 oz. tin = 7 pints liquid milk)							
Babies under 2 years not fed on liquid milk :							
at home :							
Basic allowance	...	...	...	...	...	...	1 tin per week
Supplementary allowances :							
Babies aged from	5-16 weeks	...	...	...	...	...	1 tin per fortnight
"	"	"	17-34	"	...	...	1 tin per week
"	"	"	35-44	"	...	...	1 tin per fortnight
"	"	"	45-52	"	...	...	1 tin per 4 weeks
in non-residential nurseries	...	...	...	...	...	...	approximately 1 tin per 3 weeks ⁽³⁾

⁽³⁾ The equivalent of two-thirds pint liquid milk a day.

ORANGE JUICE (6 oz. bottles)							
Expectant Mothers	...	...	...	...	...	...	1 bottle per 9 days
Babies under 6 months	...	...	...	...	...	...	1 bottle per 4 weeks
Children aged between 6 months and 5 years :							
at home	...	...	...	...	...	...	1 bottle per fortnight
in non-residential nurseries	...	...	...	...	...	...	1 bottle per 4 weeks

COD LIVER OIL COMPOUND (6 oz. bottles)							
Expectant Mothers (not taking Vitamin A and D tablets)...	...	...	...	...	...	...	1 bottle per 6 weeks
Children under 5 years :							
at home	...	...	...	...	...	...	1 bottle per 6 weeks
in non-residential nurseries	...	...	...	...	...	...	1 bottle per 12 weeks

VITAMIN A AND D TABLETS (packets of 45 tablets)							
Expectant and nursing mothers :							
Before confinement (as an alternative to cod liver oil)	...	...	...	...	...	...	} 1 packet per 6 weeks
For 30 weeks after confinement	...	...	...	...	...	...

TABLE II : PRICES OF WELFARE FOODS
(All Welfare Foods are provided free in necessitous cases)

Product	Unit	Price per Unit	
		Private Families	Non-Residential Nurseries
MILK	Pint	1½d.	Free
NATIONAL DRIED MILK (full or half cream)	20 oz. tin (equivalent to 7 pints liquid milk)	10½d. ⁽¹⁾	Free ⁽¹⁾
ORANGE JUICE	6 oz. bottle	5d.	5d.
COD LIVER OIL COMPOUND	6 oz. bottle	Free	Free
VITAMIN A AND D TABLETS	Packet of 45 tablets	Free	Free

⁽¹⁾ The unsubsidised price of 3s. 6d. a tin must be paid for any quantities of National Dried Milk taken in addition to those provided under the Welfare Foods Service (See Table I).

TABLE III : APPROXIMATE NUTRIENT CONTENTS OF WELFARE FOODS

NATIONAL DRIED MILK

	Full Cream	Half Cream
Protein	7.3 gms. per oz.	8.6 gms. per oz.
Fat	7.6 " " "	4.7 " " "
Carbohydrate	10.1 " " "	11.8 " " "
Calories	138.0 " " "	124.0 " " "
Calcium	250.0 mgs " "	300.0 mgs " "
Iron	0.2 " " "	0.2 " " "
Vitamin A	300.0 I.U. " "	160.0 I.U. " "
Thiamin	85.0 meg. " "	100.0 meg. " "
Riboflavin	330.0 " " "	390.0 " " "
Niacin	0.20 mgms " "	0.28 mgms " "
Vitamin C	2.0 " " "	2.0 " " "
Vitamin D	280.0 I.U. " "	280.0 I.U. " "

NOTE : *The recommended consumption of National Full Cream Dried Milk provides from 800 to 1,000 I.U. of Vitamin D daily for infants when 1 tin weekly is provided.*

CONCENTRATED ORANGE JUICE

Vitamin C 60 mgm per fluid oz.

NOTE : *The recommended dose provides from 7.5 mgm of Vitamin C for infants up to 6 months and up to 22.5 mgm daily for children between 6 months and 5 years. The dose for expectant mothers provides 30 mgm of Vitamin C.*

COD LIVER OIL COMPOUND

Vitamin A 26,000 I.U. per fluid oz. ; or 1,000 I.U. per gm.
Vitamin D 5,200 I.U. per fluid oz. ; or 200 I.U. per gm.

NOTE : *A teaspoonful, which is the normal daily dosage, is equivalent to approximately 3,500 I.U. to 4,000 I.U. Vitamin A and 700 to 800 I.U. Vitamin D.*

VITAMIN A AND D TABLETS : One tablet contains :

Vitamin A 4,000 I.U.
Vitamin D 800 I.U.
Calcium phosphate 250 mgm
Potassium iodide 0.13 mgm

NOTE : *These tablets are for expectant and nursing mothers only and are available up to 30 weeks after the birth of the infant. The recommended dose is 1 tablet per day.*

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